

ISSUE SLIP STAPLE AREA (For additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SM	71055	8/16/55
O.I.P.E. CLASSIFIER		71435	8/19/55
FORMALITY REVIEW		71435	8/26/55

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	04/17/58
2	05/10/58
3	11/11/58
4	11/11/58
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Claim	Date
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BEST AVAILABLE COPY If more than 150 claims or 10 actions  
 staple additional sheet here

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